

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER

2015 APR 27 PM 12:45  
Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

ALASKA Federation of Republican Women

ADDRESS (number and street)

1233 East 76<sup>th</sup> Ave



Check if different  
than previously  
reported. (ACC)

Anchorage

AK

99518-3222

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00249250

3. IS THIS  
REPORT

☒ NEW  
(N)

OR

☐ AMENDED  
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:



April 15  
Quarterly Report (Q1)



July 15  
Quarterly Report (Q2)



October 15  
Quarterly Report (Q3)



January 31  
Year-End Report (YE)



July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)



Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

☐ Feb 20 (M2)

☐ May 20 (M5)

☐ Aug 20 (M8)

☐ Nov 20 (M11)  
(Non-Election  
Year Only)

☐ Mar 20 (M3)

☐ Jun 20 (M6)

☐ Sep 20 (M9)

☐ Dec 20 (M12)  
(Non-Election  
Year Only)

☐ Apr 20 (M4)

☐ Jul 20 (M7)

☐ Oct 20 (M10)

☐ Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM / DD /

YY / YY /

YY / YY /

in the  
State of

(d) 30-Day  
POST-Election  
Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD /

YY / YY /

YY / YY /

in the  
State of

AK

5. Covering Period

MM / DD /

YY / YY /

2015

through

MM / DD /

YY / YY /

2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Christine Hill

Signature of Treasurer

Christine Hill

Date

MM / DD /

YY / YY /

2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only

**FEC FORM 3X**  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Report Covering the Period:

From:

MM ' DD ' YYYY  
01 ' 01 ' 2015

To:

MM ' DD ' YYYY  
04 ' 15 ' 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">2015</span>		<span style="border: 1px solid black; padding: 2px;">520.03</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">520.03</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">520.03</span>	<span style="border: 1px solid black; padding: 2px;">520.03</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<span style="border: 1px solid black; padding: 2px;">520.03</span>	<span style="border: 1px solid black; padding: 2px;">520.03</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">520.03</span>	<span style="border: 1px solid black; padding: 2px;">520.03</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">520.03</span>	<span style="border: 1px solid black; padding: 2px;">520.03</span>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">6</span>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">6</span>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

DETAILED SUMMARY PAGE  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Report Covering the Period:

From:

04 ' 01 ' 2015

To:

04 ' 15 ' 2015

I. Receipts

COLUMN A  
Total This Period

COLUMN B  
Calendar Year-to-Date

11. Contributions (other than loans) From:

- (a) Individuals/Persons Other  
Than Political Committees  
(i) Itemized (use Schedule A).....

- (ii) Unitemized .....  
(iii) TOTAL (add  
Lines 11(a)(i) and (ii))..... ▶

- (b) Political Party Committees .....  
(c) Other Political Committees  
(such as PACs).....  
(d) Total Contributions (add Lines  
11(a)(iii), (b), and (c)) (Carry  
Totals to Line 33, page 5)..... ▶

12. Transfers From Affiliated/Other  
Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures  
(Refunds, Rebates, etc.)  
(Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made  
to Federal Candidates and Other  
Political Committees.....

17. Other Federal Receipts  
(Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

- (a) Non-Federal Account  
(from Schedule H3).....

- (b) Levin Funds (from Schedule H5).....

- (c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

20. Total Federal Receipts  
(subtract Line 18(c) from Line 19)..... ▶

**REPORT OF RECEIPTS AND DISBURSEMENTS  
FOR A COMMITTEE OR ORGANIZATION  
SUPPORTING A NOMINATING CONVENTION  
(Summary Page)**

1. (a) Name of Committee (in full) <u>Alaska Federation of Republican Women</u>	2. FEC Identification Number <u>C 00249250</u>
(b) Address (Number and Street) <u>1233 E. 76<sup>th</sup> Ave</u>	3. Type of Committee/Organization: <input type="checkbox"/> Convention Committee <input type="checkbox"/> Host Committee <input checked="" type="checkbox"/> Other _____ (specify)
(c) City, State and ZIP Code <u>Bethel, AK 99518-3222</u>	

4. TYPE OF REPORT (Check appropriate box(es)):

(a) ☐ POST CONVENTION REPORT

☒ QUARTERLY REPORT (check one)

☐ April 15

☐ July 15

☐ October 15

☐ January 31

☐ FINAL REPORT

(b) Is this an Amendment?

☐ YES

☒ NO

**SUMMARY OF RECEIPTS AND DISBURSEMENTS**

5. Covering Period FROM: 1-2014 THROUGH: 12-2014

SECTION A — CASH BALANCE SUMMARY	Column A This Period	Column B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 20 <u>15</u>		<u>520.03</u>
(b) Cash on Hand at Beginning of Reporting Period	<u>7520.03</u>	
(c) Total Receipts (From Line 20)		
(d) Subtotal (Add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		
7. Total Disbursements (From Line 25)	<u>7000.00</u>	
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))		
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C or Schedule D)		
<b>SECTION B — SUMMARY OF EXPENDITURES SUBJECT TO LIMITATIONS</b>		
11. Convention Expenditures (From Line 21(c))		
12. Refunds, Rebates, Returns of Deposits Relating to Convention Expenditures (From Line 17(c))		
(a) Expenditures Subject to Limitation (Subtract Line 12 from Line 11)		
(b) Expenditures from Prior Years Subject to Limitation		
(c) Total Expenditures Subject to Limitation (Add Lines 12(a) and 12(b))		

I certify that I have examined this report, and to the best of my knowledge and belief it is true, correct and complete.

Christine Hill

Type or Print of Treasurer

Christine Hill

SIGNATURE OF TREASURER

4-21-15

Date

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109

For Further  
Information  
Contact: Federal Election Commission  
Toll Free 800/424-9530  
Local 202/694-1100

**SCHEDULE B (FEC Form 4)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE OF

☐ 21a ☐ 22 ☐ 23a ☐ 23b ☐ 24a

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ALASKA Republican Party

Full Name (Last, First, Middle Initial)

Date of Disbursement

A.

1001 West Fireweed LN

08 / 25 / 2014

Mailing Address

Anchorage

AK

99577

City

State

Zip Code

Purpose of Disbursement

Absentee ballots

CK # 3000

Amount of Each Disbursement this Period

7,000.00

Candidate Name

(907) 276-4467

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional) .....

7,000.00

TOTAL This Period (last page this line number only) .....

7,000.00

UNN-241-1001

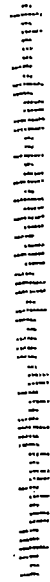
Mr Duane Hill  
1233 E 76th Ave  
Anchorage, AK 99518



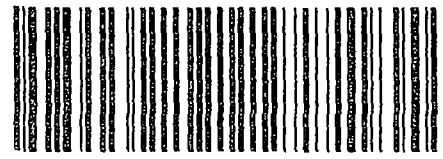
RETURN RECEIPT  
REQUESTED

FEC  
999 E. Street, NW  
Washington DC 20463

RECEIVED  
FEC MAIL CENTER  
2015 APR 27 PM 12




121 1010 0000 0101 210



CERTIFIED MAIL  
PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked Date of Receipt
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 4/21/15
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER	4/27/15 DATE PREPARED

PREPARER  
(3/2015)

DATE PREPARED